

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10291926

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

| | | |
|----------------------------------|--------------|--------------------------|
| TOTAL CLAIMS | 14 | |
| FOR | NUMBER FILED | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS | 14 minus 20= | 0 |
| INDEPENDENT CLAIMS | 2 minus 3 = | 0 |
| MULTIPLE DEPENDENT CLAIM PRESENT | | <input type="checkbox"/> |

SMALL ENTITY
TYPE OTHER THAN
OR SMALL ENTITY

| | | | |
|-----------|--------|--------------|--------|
| RATE | FEES | RATE | FEES |
| BASIC FEE | 385.00 | OR BASIC FEE | 770.00 |
| X\$ 9= | / | OR X\$18= | / |
| X43= | / | OR X86= | / |
| +145= | / | OR +290= | / |
| TOTAL | 385 | OR TOTAL | |

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|---|---|---|-------|---|------------------|
| | | | | | |
| Total | * | 14 | Minus | 20 | = |
| Independent | * | 2 | Minus | 3 | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM. | | | | | |

(Column 1) (Column 2) (Column 3)

| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|--|---|---|-------|---|------------------|
| | | | | | |
| Total | * | | Minus | 0 | = |
| Independent | * | | Minus | 0 | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | |

SMALL ENTITY OR OTHER THAN
OR SMALL ENTITY

| | | | |
|--------------------|------------------------|-----------------------|------------------------|
| RATE | ADDI- TIONAL FEE | RATE | ADDI- TIONAL FEE |
| X\$ 9= | | OR X\$18= | |
| X43= | | OR X86= | |
| +145= | | OR +290= | |
| TOTAL ADDT. FEE | | OR TOTAL ADDT. FEE | |

(Column 1) (Column 2) (Column 3)

| AMENDMENT C | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|--|---|---|-------|---|------------------|
| | | | | | |
| Total | * | | Minus | 0 | = |
| Independent | * | | Minus | 0 | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | |

| | | | |
|--------------------|------------------------|-----------------------|------------------------|
| RATE | ADDI- TIONAL FEE | RATE | ADDI- TIONAL FEE |
| X\$ 9= | | OR X\$18= | |
| X43= | | OR X86= | |
| +145= | | OR +290= | |
| TOTAL ADDT. FEE | | OR TOTAL ADDT. FEE | |

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- ** The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.